



2113/41

PATENT  
Attorney Docket No. SRT-024  
(5049/34)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: McLoughlin et al. CONFIRMATION NO. 4529  
SERIAL NUMBER: 09/832,467 ART UNIT: 2113  
FILING DATE: April 11, 2001 EXAMINER: McCarthy, C.  
TITLE: Apparatus and Method For Accessing A Mass Storage Device In A Fault-Tolerant Server

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

RECEIVED

DEC 07 2004

Technology Center 2100

AMENDMENT AND RESPONSE

Sir:

In response to the Office Action mailed on September 16, 2004 in connection with the above-identified patent application, Applicants respectfully submit the following Amendment and Response:

- Amendments to the Claims are reflected in a listing of claims and begin on page 2 of this paper;
- Remarks begin on page 9 of this paper; and
- Conclusion begins on page 13 of this paper.

Enclosed is a check for \$230 to cover the fee for two new independent claims in excess of three, and three new claims in excess of 20. The Applicants believe no additional fees are due with the present Amendment and Response. However, if any other extension period or fee is required to have this Amendment and Response entered or considered, please consider this a conditional petition for the proper extension and authorization to charge the required fees to Deposit Account No. 20-0531.

12/03/2004 DEMMANU1 00000042 09832467

01 FC:1201 176.00 DP  
02 FC:1202 54.00 DP



PATENT  
Attorney Docket No. SRT-024

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): McLoughlin et al. CONFIRMATION NO.: 4529  
SERIAL NO.: 09/832,467 GROUP NO.: 2113  
FILING DATE: April 11, 2001 EXAMINER: McCarthy, C.  
TITLE: APPARATUS AND METHOD FOR ACCESSING A MASS  
STORAGE DEVICE IN A FAULT-TOLERANT SERVER

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 30<sup>th</sup> day of November, 2004.

Katherine Gu

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Submitted herewith is/are:

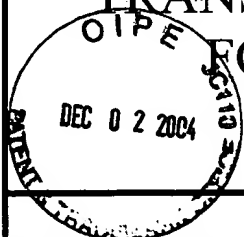
1. Transmittal Form (1 pg.);
2. Fee Transmittal (1 pg.);
3. Amendment and Response (13 pgs.);
4. Check in the amount of \$230.00; and
5. Return Receipt Postcard.

RECEIVED

DEC 07 2004

Technology Center 2100

# TRANSMITTAL FORM



Application Serial Number	09/832,467
Filing Date	April 11, 2001
First Named Inventor	McLoughlin
Confirmation Number	4529
Group Art Unit	2113
Examiner Name	McCarthy, C.
Attorney Docket No.	SRT-024

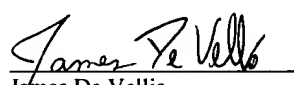
## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (1 pg.) <input checked="" type="checkbox"/> Check Attached (\$230.00) <input type="checkbox"/> Copy of Fee Transmittal Form  <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]  <input type="checkbox"/> Petition for Extension of One-Month Time (1 pg.)  <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application  <input type="checkbox"/> Formal Drawing(s)  <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal  <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> CD(s) for large table or computer program  <input type="checkbox"/> Amendment After Allowance  <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences  <input type="checkbox"/> Appeal Brief (in triplicate)  <input type="checkbox"/> Status Inquiry  <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8  <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8  <input type="checkbox"/> Additional Enclosure(s) (please identify below)  <div style="text-align: center;"> <b>RECEIVED</b>  <b>DEC 07 2004</b>  <b>Technology Center 2100</b> </div>
---	---	--

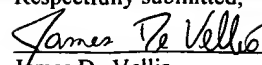
### CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator  
 Testa, Hurwitz & Thibault, LLP  
 High Street Tower  
 125 High Street  
 Boston, MA 02110  
 Tel. No.: (617) 248-7000  
 Fax No.: (617) 248-7100

### SIGNATURE BLOCK

Respectfully submitted,  
  
 Date: November 30, 2004  
 Reg. No. 52,814  
 Tel. No.: (617) 310-8664  
 Fax No.: (617) 248-7100  
 James De Vellis  
 Attorney for the Applicants  
 Testa, Hurwitz & Thibault, LLP  
 High Street Tower  
 125 High Street  
 Boston, MA 02110

<b>OFFICE TRANSMITTAL</b> DEC 02 2004 2010	Complete if Known	
	Application Serial Number	09/832,467
	Filing Date	April 11, 2001
	First Named Inventor	McLoughlin
	Group Art Unit	2113
Examiner Name	McCarthy, C.	<b>RECEIVED</b> DEC 07 2004 Technology Center 2100
Attorney Docket No.	SRT-024	

METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																																
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other  2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit. 3. <input type="checkbox"/> Applicant claims small entity status.	<b>3. ADDITIONAL FEES</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee (\$)</th> <th style="text-align: left;">Small Entity Fee (\$)</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>2,520</td><td>2,520</td><td>Request for ex parte reexamination</td><td></td></tr> <tr><td>110</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>430</td><td>215</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>980</td><td>490</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1530</td><td>765</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>2080</td><td>1040</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>340</td><td>170</td><td>Notice of Appeal</td><td></td></tr> <tr><td>340</td><td>170</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>340</td><td>170</td><td>Request for oral hearing</td><td></td></tr> <tr><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>790</td><td>395</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>790</td><td>395</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>100</td><td>100</td><td>Certificate of Correction for applicant's error</td><td></td></tr> <tr><td>110</td><td>55</td><td>Submission of Terminal Disclaimer</td><td></td></tr> <tr><td colspan="2">Other fee (Specify)</td><td></td><td></td></tr> <tr><td colspan="2">Other fee (Specify)</td><td></td><td></td></tr> </tbody> </table>	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month		430	215	Extension for reply within second month		980	490	Extension for reply within third month		1530	765	Extension for reply within fourth month		2080	1040	Extension for reply within fifth month		340	170	Notice of Appeal		340	170	Filing a brief in support of an appeal		340	170	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement		790	395	Filing a submission after final rejection (37 CFR 1.129(a))		790	395	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		110	55	Submission of Terminal Disclaimer		Other fee (Specify)				Other fee (Specify)															
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																														
130	65	Surcharge - late filing fee or oath																																																																																															
50	25	Surcharge - late provisional filing fee or cover sheet																																																																																															
130	130	Non-English specification																																																																																															
2,520	2,520	Request for ex parte reexamination																																																																																															
110	55	Extension for reply within first month																																																																																															
430	215	Extension for reply within second month																																																																																															
980	490	Extension for reply within third month																																																																																															
1530	765	Extension for reply within fourth month																																																																																															
2080	1040	Extension for reply within fifth month																																																																																															
340	170	Notice of Appeal																																																																																															
340	170	Filing a brief in support of an appeal																																																																																															
340	170	Request for oral hearing																																																																																															
130	130	Petitions to the Commissioner																																																																																															
180	180	Submission of Information Disclosure Statement																																																																																															
790	395	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																															
790	395	For each additional invention to be examined (37 CFR 1.129(b))																																																																																															
100	100	Certificate of Correction for applicant's error																																																																																															
110	55	Submission of Terminal Disclaimer																																																																																															
Other fee (Specify)																																																																																																	
Other fee (Specify)																																																																																																	
<b>FEE CALCULATION</b> <b>1. FILING FEE</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee (\$)</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>790</td><td>Utility filing fee</td><td></td></tr> <tr><td>350</td><td>Design filing fee</td><td></td></tr> <tr><td>160</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Number Filed</th> <th style="text-align: center;">Number Extra</th> <th style="text-align: center;">Rate</th> <th style="text-align: center;">Amount</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td style="text-align: center;">- 20 =</td> <td></td> <td style="text-align: center;">x \$ 18.00 =</td> <td></td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: center;">- 3 =</td> <td></td> <td style="text-align: center;">x \$ 88.00 =</td> <td></td> </tr> <tr> <td colspan="4"><input type="checkbox"/> Multiple Dependent Claim(s), if any</td> <td style="text-align: center;">\$300.00 =</td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (1)</td> <td style="text-align: right;">(\$ ) 0.00</td> </tr> </tbody> </table> <b>2. AMENDMENT CLAIM FEES</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Claims Remaining After Amend.</th> <th style="text-align: center;">Highest No. Previously Paid For</th> <th style="text-align: center;">Present Extra</th> <th style="text-align: center;">Rate</th> <th style="text-align: center;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total 23</td> <td style="text-align: center;">- 20 =</td> <td style="text-align: center;">3</td> <td style="text-align: center;">x \$ 18.00 =</td> <td style="text-align: right;">54.00</td> </tr> <tr> <td>Indep. 5</td> <td style="text-align: center;">- 3 =</td> <td style="text-align: center;">2</td> <td style="text-align: center;">x \$ 88.00 =</td> <td style="text-align: right;">176.00</td> </tr> <tr> <td colspan="4"><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td> <td style="text-align: center;">+ \$300.00 =</td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td style="text-align: right;">(\$ ) 230.00</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td style="text-align: right;">(\$ )</td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (2)</td> <td style="text-align: right;">(\$ ) 230.00</td> </tr> </tbody> </table>	Large Entity Fee (\$)	Fee Description	Fee Paid	790	Utility filing fee		350	Design filing fee		160	Provisional filing fee			Number Filed	Number Extra	Rate	Amount	Total Claims	- 20 =		x \$ 18.00 =		Independent Claims	- 3 =		x \$ 88.00 =		<input type="checkbox"/> Multiple Dependent Claim(s), if any				\$300.00 =	TOTAL:					SMALL ENTITY DISCOUNT:					SUBTOTAL (1)				(\$ ) 0.00	Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	Total 23	- 20 =	3	x \$ 18.00 =	54.00	Indep. 5	- 3 =	2	x \$ 88.00 =	176.00	<input type="checkbox"/> First Presentation of Multiple Dep. Claim				+ \$300.00 =	TOTAL:				(\$ ) 230.00	SMALL ENTITY DISCOUNT:				(\$ )	SUBTOTAL (2)				(\$ ) 230.00	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; width: 60%;">SUBTOTAL (3)</td> <td style="text-align: right; width: 40%;">(\$ ) 0.00</td> </tr> <tr> <td colspan="2" style="height: 20px;"></td> </tr> <tr> <td style="text-align: right;">SUBTOTAL (1)</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td style="text-align: right;">SUBTOTAL (2)</td> <td style="text-align: right;">230.00</td> </tr> <tr> <td style="text-align: right;">SUBTOTAL (3)</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td colspan="2" style="height: 20px;"></td> </tr> <tr> <td style="text-align: right;"><b>TOTAL</b></td> <td style="text-align: right;"><b>(\$ ) 230.00</b></td> </tr> </table>	SUBTOTAL (3)	(\$ ) 0.00			SUBTOTAL (1)	0.00	SUBTOTAL (2)	230.00	SUBTOTAL (3)	0.00			<b>TOTAL</b>	<b>(\$ ) 230.00</b>
Large Entity Fee (\$)	Fee Description	Fee Paid																																																																																															
790	Utility filing fee																																																																																																
350	Design filing fee																																																																																																
160	Provisional filing fee																																																																																																
	Number Filed	Number Extra	Rate	Amount																																																																																													
Total Claims	- 20 =		x \$ 18.00 =																																																																																														
Independent Claims	- 3 =		x \$ 88.00 =																																																																																														
<input type="checkbox"/> Multiple Dependent Claim(s), if any				\$300.00 =																																																																																													
TOTAL:																																																																																																	
SMALL ENTITY DISCOUNT:																																																																																																	
SUBTOTAL (1)				(\$ ) 0.00																																																																																													
Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid																																																																																													
Total 23	- 20 =	3	x \$ 18.00 =	54.00																																																																																													
Indep. 5	- 3 =	2	x \$ 88.00 =	176.00																																																																																													
<input type="checkbox"/> First Presentation of Multiple Dep. Claim				+ \$300.00 =																																																																																													
TOTAL:				(\$ ) 230.00																																																																																													
SMALL ENTITY DISCOUNT:				(\$ )																																																																																													
SUBTOTAL (2)				(\$ ) 230.00																																																																																													
SUBTOTAL (3)	(\$ ) 0.00																																																																																																
SUBTOTAL (1)	0.00																																																																																																
SUBTOTAL (2)	230.00																																																																																																
SUBTOTAL (3)	0.00																																																																																																
<b>TOTAL</b>	<b>(\$ ) 230.00</b>																																																																																																
<b>CORRESPONDENCE ADDRESS</b> Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100	<b>SIGNATURE BLOCK</b> Respectfully submitted,  James De Vellis Attorney for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110  Date: November 30, 2004 Reg. No.: 52,814 Tel. No.: (617) 310-8664 Fax No.: (617) 248-7100																																																																																																